OFFICIAL ABSE	NTEE BALL	OT APPLICA	TION/	CERTI	FICATION .	
(Official Use Only) The initial here:	voter has met or	is exempt from th	e photo	ID require	ement. Municipal or Deputy C	Clerk
<u>Note:</u> With certain exceptions, an elector who mails or personally delivers an absentee ballot to the municipal clerk at an election is not permitted to vote in person at the same election on Election Day. Wis. Stat. §6.86(6).						
Voter: Please complete steps 1 through 5 below, in the presence of your witness.						
Place your voted ballot inside the envelope and seal it. Do not use tape or glue.						
Complete the section below if not completed by the clerk. Provide your VOTING address.						
Date of Election (month, day, year) County						
Municipality (check type and list name) Town ☐ Village ☐ City ☐ of						
Voter's Name (Last, First, Middle) including suffix (Please print legibly)						
Street Address-Provide house number and street name or fire number and street name. OR						
	does not include	a house number	/fire nun	nber and	street name, provide rural r	oute
number and box no.						
City				\A/I	Zip Code	
				WI		
Official use only:	Ward #	District (if appli	icable)		Voted in clerk's office	
3 Sign and date this section.						
I certify, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), that I am a resident of the ward of the municipality in the county of the state of Wisconsin indicated hereon, and am entitled to vote in the ward at the election indicated hereon; that I am not voting at any other location in this election; that I am unable or unwilling to appear at the polling place in the ward on election day, or I have changed my residence within the state from one ward to another later than 10 days before the election. I certify that I exhibited the enclosed ballot, unmarked, to the witness, that I then in the presence of the witness and in the presence of no other person marked the ballot and enclosed and sealed the ballot in this envelope in a manner that no one but myself and any person providing assistance under Wis. Stat. § 6.87(5), if I requested assistance, could know how I voted. I further certify that I requested this ballot.						
▲ Signature of V	oter ▲ (All vote	rs must sign.)			/ Today's Date	
REQUIRED OF MILITARY AND OVERSEAS VOTER ONLY: I further certify my birth date is:						
Have your witness sign and write their address below.						
CERTIFICATION OF WITNESS (signature and address of witness are required)						
I, the undersigned witness, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), certify that I am an adult U.S. Citizen and that the above statements are true and the voting procedure was executed as stated. I am not a candidate for any office on the enclosed ballot (except in the case of an incumbent municipal clerk). I did not solicit or advise the voter to vote for or against any candidate or measure. I further certify that the name and address of the voter is correct as shown.						
1						
	are Special Votin vitness or addre			ign. ▲		
Provide house number and street name or fire number and street name, city, state and zip code. OR If your rural address does not include a house number/fire number and street name, provide rural route number and box number, city, state and zip code.						
CERTIFICATION OF ASSISTANT (if applicable) - assistant may also be witness I certify that the voter named on this certificate is unable to sign his/her name or make his/her mark due to a physical disability and that I signed the voter's name at the direction and request of the voter. X						
▲ Signature of As		4.5 days for 4	oliver:	to one::	re veur bellet is ressire.	d by
Mail back your ballot. Allow 4-5 days for delivery to ensure your ballot is received by Election Day. Ballots received after Election Day will NOT be counted.						